

Name of Facility: \_\_\_\_\_

(Insert Facility logo)

## Infant/Toddler Safe Sleep Policy SAMPLE (BASIC) TEMPLATE

Date Adopted: \_\_\_\_\_

Sudden Infant Death Syndrome (SIDS) is the unexpected death of a seemingly healthy baby for whom no cause of death can be determined based on an autopsy, an investigation of the place where the baby died and a review of the baby's medical history.

The Child Care Law requires that child care providers caring for children 12 months of age or younger implement a safe sleep policy, share this information with parents, and participate in training.

This facility believes all families have a right to safe and healthy child care and will practice the following safe sleep policy:

### Mandatory Safe Sleep Practices

1. All child care staff working in the infant room, or child care staff with scheduled hours in the infant room, will receive training on our Infant Safe Sleep Policy and SIDS risk reduction.
2. Infants will always be placed on their backs to sleep, unless there is a signed sleep position waiver on file as allowed by law. A notice will be posted for quick reference near the infant's crib, playpen, or bassinet.
3. Infants will be placed to sleep in a crib, playpen, or bassinet with a firm mattress.
4. Infants' heads will not be covered with blankets or bedding. The tops of infants' cribs will not be covered with bedding.
5. Room temperature will not exceed 75 degrees F.
6. Only one infant will be in a crib at a time, unless we are evacuating infants in an emergency or in practice drills.
7. No smoking is permitted in the building while children are present and no smoking allowed in vehicles when transporting children.
8. Awake babies will be given supervised "tummy time."
9. Caregivers will visually check on sleeping infants. We will check them by (doing what?):  
We will check them (how often?):  
We will document that we checked them by (doing what?):

### Optional Safe Sleep Practices

10. Will pillows, blankets, toys, or other objects be placed in infants' cribs? YES or NO  
If YES, the following number and types of objects are allowed:
11. The following describes what we will do if babies change position after being placed on their backs to sleep:
12. Other steps we will follow to provide a safe sleep environment include:

**NOTE:** All parents/guardians of infants cared for in this facility will receive a written copy of our Infant/Toddler Safe Sleep Policy and information about SIDS risk reduction before enrollment.

I, the undersigned parent or guardian of \_\_\_\_\_ (child's full name), do hereby state that I have read and received a copy of the facility's Infant/Toddler Safe Sleep Policy and that the facility's director/owner/operator (or other designated staff member) has discussed the facility's Infant/Toddler Safe Sleep Policy with me.

Date of Child's Enrollment: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Child Care Provider: \_\_\_\_\_ Date: \_\_\_\_\_

*Distribution: one signed copy to parent(s)/guardian(s); signed copy in child's facility record.*

